United States Bankruptcy Court Eastern District of Wisconsin							Vol	untary Petition					
Name of Debtor (if individual, enter Last, First, Middle):  Moore, Michael A.						of Joint De ore, Lisa	ebtor (Spouse	e) (Last, First	, Middle):				
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):						used by the J maiden, and			3 years				
	igits of Soc. Sone, state all) 6821	Sec. or Indi	vidual-Tax <sub>I</sub>	oayer I.D. (	ITIN) No./0	Complete El	(if mor	our digits of e than one, s c-xx-8194	tate all)	· Individual-7	Гахрауег I.	D. (ITIN) No./Complete EIN	1
	ess of Debto spen Stree Bay, WI	•	Street, City,	and State)	_	ZIP Code	170 Gr	Address of 63 Asper een Bay,		(No. and St	reet, City, a	ZIP Code	
County of F	Residence or	of the Princ	cipal Place	of Business		54303		y of Reside <b>own</b>	nce or of the	Principal Pla	ace of Busi	54303 ness:	_
Mailing Ad	dress of Deb	tor (if diffe	rent from st	reet addres	ss):		Mailir	g Address	of Joint Debt	or (if differe	nt from stre	eet address):	
					г	ZIP Code						ZIP Code	_
	Principal As from street a			or									
	Type of (Form of O	Debtor rganization)				of Business				of Bankrup Petition is Fi		Under Which one box)	_
See Exh	ual (includes aibit D on pagation (include	ge 2 of this	form.	☐ Sing in 1 ☐ Rail ☐ Stoo	1 U.S.C. § 1 road ckbroker modity Bro	eal Estate as 101 (51B)	defined	Chapte Chapte Chapte Chapte Chapte	er 9 er 11 er 12	of □ Cl	a Foreign hapter 15 P	etition for Recognition Main Proceeding tetition for Recognition Nonmain Proceeding	
☐ Clearing Bank ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) ☐ Check this box and state type of entity below.) ☐ Tax-Exempt Entity ☐ (Check box, if applicable) ☐ Debtor is a tax-exempt organ under Title 26 of the United is Code (the Internal Revenue Code)			anization d States	defined "incurr	re primarily co l in 11 U.S.C. § ed by an indivi nal, family, or	(Check onsumer debts, § 101(8) as idual primarily	for	☐ Debts are primarily business debts.					
<b>-</b> E 11 E 21	· F "		ee (Check o	one box)				one box:		Chapter 11		11 U.S.C. § 101(51D).	_
<ul> <li>Full Filing Fee attached</li> <li>Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.</li> <li>Filing Fee waiver requested (applicable to chapter 7 individuals only). Must</li> </ul>				or Check	Debtor is if: Debtor's a	not a small b aggregate nor s or affiliates)	usiness debto	or as define	d in 11 U.S.C. § 101(51D). ebts (excluding debts owed				
attach s	igned applica	ation for the	e court's cor	isideration.	See Official	Form 3B.		A plan is l	being filed water the plant the plan	n were solici	ted prepetit	tion from one or more a.C. § 1126(b).	
Debtor of there with	Administrat estimates tha estimates tha ill be no fund	t funds will t, after any ls available	be available exempt pro	perty is ex	cluded and	administrati		es paid,		THIS	SPACE IS	FOR COURT USE ONLY	
Estimated N  1- 49	Number of Ci 50- 99	reditors  100- 199	□ 200- 999	1,000- 5,000	5,001- 10,000	10,001- 25,000	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated A  \$0 to \$50,000	Assets  \$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion				
Estimated I  \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion				

B1 (Official Form 1)(1/08) Page 2 Name of Debtor(s): Voluntary Petition Moore, Michael A. Moore, Lisa S. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: E.D. of Wisconsin 04-26960 5/05/04 Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Timothy P. Dewane June 19, 2008 Signature of Attorney for Debtor(s) (Date) Timothy P. Dewane Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. П Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and П Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(1/08) Page 3

#### **Voluntary Petition**

(This page must be completed and filed in every case)

Name of Debtor(s):

Moore, Michael A. Moore, Lisa S.

#### Signatures

## Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Michael A. Moore

Signature of Debtor Michael A. Moore

X /s/ Lisa S. Moore

Signature of Joint Debtor Lisa S. Moore

Telephone Number (If not represented by attorney)

June 19, 2008

Date

#### Signature of Attorney\*

#### X /s/ Timothy P. Dewane

Signature of Attorney for Debtor(s)

#### Timothy P. Dewane 1030349

Printed Name of Attorney for Debtor(s)

#### **Dewane Law Offices, LLP**

Firm Name

927 South 8th Street PO Box 1507 Manitowoc, WI 54221-1507

Address

Email: info@dewanelaw.com

(920) 682-7732 Fax: (920) 682-3384

Telephone Number

June 19, 2008

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

₹7	
×	

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

~	
/	

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Page 3 of 59

Official Form 1, Exhibit D (10/06)

## **United States Bankruptcy Court Eastern District of Wisconsin**

	Michael A. Moore			
In re	Lisa S. Moore		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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Best Case Bankruptcy

# Official Form 1, Exh. D (10/06) - Cont. □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Michael A. Moore
Michael A. Moore

Date: June 19, 2008

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Official Form 1, Exhibit D (10/06)

## **United States Bankruptcy Court Eastern District of Wisconsin**

	Michael A. Moore			
In re	Lisa S. Moore		Case No.	
		Debtor(s)	Chapter	7

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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## Official Form 1, Exh. D (10/06) - Cont.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or
mental deficiency so as to be incapable of realizing and making rational decisions with respect to
financial responsibilities.);

☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

☐ Active military duty in a military combat zone.

□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Lisa S. Moore
Lisa S. Moore

Date: June 19, 2008

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#### **United States Bankruptcy Court Eastern District of Wisconsin**

In re	Michael A. Moore,		Case No.	
	Lisa S. Moore			
-		Debtors	Chapter	7

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amount of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	110,000.00		
B - Personal Property	Yes	4	11,600.00		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	1		97,200.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	11		35,666.07	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			2,924.00
J - Current Expenditures of Individual Debtor(s)	Yes	1			3,157.00
Total Number of Sheets of ALL Schedules		24			
	T	otal Assets	121,600.00		
			Total Liabilities	132,866.07	

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#### **United States Bankruptcy Court Eastern District of Wisconsin**

In re	Michael A. Moore,		Case No.		
	Lisa S. Moore				
_		Debtors ,	Chapter	7	

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159. Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

#### State the following:

Average Income (from Schedule I, Line 16)	2,924.00
Average Expenses (from Schedule J, Line 18)	3,157.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	1,909.63

#### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		35,666.07
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		35,666.07

Michael A. Moore, Lisa S. Moore

Debtors

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Nature of Debtor's Wife, Debtor's Interest in Am	1763 Aspen Lane Green Bay, WI 54303		Fee Simple	С	110,000.00	97,000.00	
	Description and Location of Property			Joint, or	Property, without Deducting any Secured	Amount of Secured Claim	

Sub-Total > **110,000.00** (Total of this page)

Total > 110,000.00

**0** continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

Michael A. Moore, Lisa S. Moore

Cuse 110.

Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	Cash	С	20.00
2.	Checking, savings or other financial	Savings account at Nicolet Bank	С	100.00
	accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	checking account at Wells Fargo	С	60.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	2 Televisions (\$200), VCR (\$25), DVD (\$50), Computer (\$1,000), Refrigerator (\$300), Stove (\$200), Washer/Dryer (\$250), Microwave (\$25), Freezer (\$200), Bedroom Furniture (\$200), Living Room Furniture (\$400), Kitchen Set (\$25), Children's Bedroom Furniture (\$50), Lawn Mower (\$20), Lawn Tractor (\$1,500)	С	4,445.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	CD's/Videos/DVD's	С	200.00
6.	Wearing apparel.	Clothes	С	300.00
7.	Furs and jewelry.	Wedding Rings	С	1,500.00
8.	Firearms and sports, photographic, and other hobby equipment.	Shotgun, Rifle, .22 Rifle, 35mm Camera (\$125), Hunting Gear (\$100), Fishing Gear (\$100), Tools (\$600)	С	925.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	2 term life policies	С	0.00
			G 1 77 ·	1 7.550.00

Doc 1

Sub-Total >7,550.00 (Total of this page)

In re Michael A. Moore, Lisa S. Moore

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10.	Annuities. Itemize and name each issuer.	X			
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.		Savings Bond	С	100.00
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.		2007 tax refund received and spent prior to filing	С	0.00
	including tax retuilds. Give particulars.		2007 tax refunds received and spent prior to filing	С	0.00
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

100.00 Sub-Total > (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re Michael A. Moore, Lisa S. Moore

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	Х			
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		1992 GMC Sierra 170,000 miles front end damage	С	1,500.00
			Utility Trailer	С	150.00
			1993 Chrysler New Yorker	С	1,600.00
			1983 Ford F150 poor condition	С	200.00
			1994 Dodge Caravan	С	500.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			

(Total of this page)

Sub-Total >

3,950.00

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

In re Michael A. Moore, Lisa S. Moore

#### Debtors

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
32.	Crops - growing or harvested. Give particulars.	х			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

Sub-Total >
(Total of this page)

Total > **11,600.00** 

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

0.00

Michael A. Moore, Lisa S. Moore

Debtors

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$136,875.
■ 11 U.S.C. §522(b)(2)	
□ 11 U.S.C. §522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property 1763 Aspen Lane Green Bay, WI 54303	11 U.S.C. § 522(d)(1)	13,000.00	110,000.00
Cash on Hand Cash	11 U.S.C. § 522(d)(5)	20.00	20.00
<u>Checking, Savings, or Other Financial Accounts,</u> Savings account at Nicolet Bank	Certificates of Deposit 11 U.S.C. § 522(d)(5)	100.00	100.00
checking account at Wells Fargo	11 U.S.C. § 522(d)(5)	60.00	60.00
Household Goods and Furnishings 2 Televisions (\$200), VCR (\$25), DVD (\$50), Computer (\$1,000), Refrigerator (\$300), Stove (\$200), Washer/Dryer (\$250), Microwave (\$25), Freezer (\$200), Bedroom Furniture (\$200), Living Room Furniture (\$400), Kitchen Set (\$25), Children's Bedroom Furniture (\$50), Lawn Mower (\$20), Lawn Tractor (\$1,500)	11 U.S.C. § 522(d)(3)	4,445.00	4,445.00
Books, Pictures and Other Art Objects; Collectible CD's/Videos/DVD's	<u>es</u> 11 U.S.C. § 522(d)(5)	200.00	200.00
Wearing Apparel Clothes	11 U.S.C. § 522(d)(5)	300.00	300.00
Furs and Jewelry Wedding Rings	11 U.S.C. § 522(d)(4)	1,500.00	1,500.00
Firearms and Sports, Photographic and Other Ho Shotgun, Rifle, .22 Rifle, 35mm Camera (\$125), Hunting Gear (\$100), Fishing Gear (\$100), Tools (\$600)	bby Equipment 11 U.S.C. § 522(d)(5)	925.00	925.00
Interests in Insurance Policies 2 term life policies	11 U.S.C. § 522(d)(7)	0.00	0.00
Government & Corporate Bonds, Other Negotiabl Savings Bond	e & Non-negotiable Inst. 11 U.S.C. § 522(d)(5)	100.00	100.00
Automobiles, Trucks, Trailers, and Other Vehicles 1992 GMC Sierra 170,000 miles front end damage	5 11 U.S.C. § 522(d)(5)	1,300.00	1,500.00
Utility Trailer	11 U.S.C. § 522(d)(2)	150.00	150.00
1993 Chrysler New Yorker	11 U.S.C. § 522(d)(2)	1,600.00	1,600.00

In re Michael A. Moore, Lisa S. Moore

Debtors

#### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption		
1983 Ford F150 poor condition	11 U.S.C. § 522(d)(5)	200.00	200.00		
1994 Dodge Caravan	11 U.S.C. § 522(d)(2)	500.00	500.00		

Total: **24,400.00 121,600.00** 

Michael A. Moore, Lisa S. Moore

Case No.	

**Debtors** 

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured

guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CD FD FOR MALL	C	Hu	sband, Wife, Joint, or Community		Ç	U	D	AMOUNT OF	
CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C J H	DATE CLAIM WA NATURE OF DESCRIPTION A OF PROF SUBJECT	LIEN, AND AND VALUE PERTY	IGI	L I	S P U T E D	CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			Auto Loan		Т	E			
American General Finance 1780 West Mason Street Green Bay, WI 54303-2331		С	1992 GMC Sierra 170,000 miles front end damage						
			Value \$	1,500.00				200.00	0.00
Account No.			Mortgage						
Washington Mutual P.O. Box 3139 Milwaukee, WI 53201-3139		С	1763 Aspen Lane Green Bay, WI 54303						
			Value \$	110,000.00	1			97,000.00	0.00
Account No.			Value \$		-				
Account No.									
	_		Value \$				$\downarrow$		
continuation sheets attached	Subtotal (Total of this page)					)	97,200.00	0.00	
	Total (Report on Summary of Schedules)					) [	97,200.00	0.00	

Michael A. Moore, Lisa S. Moore

**Debtors** 

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

total also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Michael A. Moore, Lisa S. Moore

Case No.	

**Debtors** 

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. \$112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	С	Н	usband, Wife, Joint, or Community	С	U	ı D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE	ONTINGENT	UNLIGUIDA	UTED	
Account No. 02 SC 6280			Money Judgment	Ť	A T E D		
Alan R. Case 4109 Creamery Road De Pere, WI 54115		С			D	)	4 007 00
Account No. <b>03 SC 4751</b>	+	<u> </u>	Miscellaneous Purchases				1,397.00
Americredit Financial Services c/o Attorney Jerome Johnson Twp Plz East 330 East Kilbourn Avenue, #560 Milwaukee, WI 53202-3144		С					232.00
Account No. 11700501	$\dagger$	$^{+}$	2003		T	+	
Associated Banc-Corp c/o Monco Services, Inc. P.O. Box 1641 Brookfield, WI 53008-1641		С	Collection account				
A 44700500	1	$\perp$	0000	_	_	+	84.00
Account No. 11700502  Associated Banc-Corp c/o Monco Services, Inc. P.O. Box 1641 Brookfield, WI 53008-1641		С	2003 Collection account				347.00
		1	(Total o	Sub f this			2,060.00

In re	Michael A. Moore
	Lisa S. Moore

Case No.	

#### Debtors

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	1 - 1	AMOUNT OF CLAIM
Account No. <b>784F4003936</b>			2007	T	E		
Bank Mutual c/o Finance System of Green Bay PO Box 1597 Green Bay, WI 54305		С	Collection account		D		2,051.00
Account No.	T		2003				
Bellin Health Bellin Provider Billing P.O. Box 22487 Green Bay, WI 54305-2487		С	Medical Bills				800.00
Account No. <b>03 SC 3148</b>	┢		Money Judgment	╁			
Bellin Health c/o Attorney John Foscato P.O. Box 1133 Green Bay, WI 54305-1133		С					1,668.41
Account No. <b>B0000044898</b>	T		2008	T			
Bellin Health PO Box 22487 Green Bay, WI 54305-2487		С	Medical bill				3,807.80
Account No. <b>V0011189019</b>			2008	t			
Bellin Memorial Hospital c/o Finance Systems of Green Bay P.O. Box 1597 Green Bay, WI 54305		С	Medical Bill				957.29
Sheet no1 of _10_ sheets attached to Schedule of				Sub	tota	1	9,284.50
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	9,204.50

In re	Michael A. Moore
	Lisa S. Moore

Case No.	

#### Debtors

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C H H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED		AMOUNT OF CLAIM
Account No.			2003 Miscellaneous Purchases		E		
Citi Cards P.O. Box 6405 The Lakes, NV 88901-6405		С					521.91
Account No.	┢		2008	$\vdash$	$\vdash$		
Finance System of Green Bay, Inc. 301 N. Jackson St. P.O. Box 1597 Green Bay, WI 54305	-	С	collection account				
							2,500.00
Account No. V00110868346  Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305	-	С	2008 Collection account				270.00
Account No. <b>V0011068300</b>	┢		2007	┢	H		
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				456.00
Account No. <b>B60542B</b>	$\vdash$		2007	$\vdash$	$\vdash$		
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305	-	С	Collection account				72.00
Sheet no. 2 of 10 sheets attached to Schedule of				Sub	ota	1	2 940 04
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	3,819.91

In re	Michael A. Moore
	Lisa S. Moore

Case No.		

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H V C	IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED		AMOUNT OF CLAIM
Account No. B68626E			2007 Collection account		E		
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С					129.00
Account No. <b>B60542</b>	t	T	2004				
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				
							199.00
Account No. B44898E  Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	2007 Collection account				160.00
Account No. P34217B			2003				
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				12.00
Account No. <b>Z20809C</b>	t	H	2007	1	$\vdash$		
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305	1	С	Collection account				140.00
Sheet no. <b>3</b> of <b>10</b> sheets attached to Schedule of			2	Subi	ota	1	640.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	640.00

In re	Michael A. Moore
	Lisa S. Moore

Case No.		

#### Debtors

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	I D	E	AMOUNT OF CLAIM
Account No. <b>V0010883680</b>			2006	T	A T E D		
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account		D		100.00
Account No. <b>V0010920317</b>			2006				
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				
							100.00
Account No. B44898C  Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	2006 Collection account				72.00
Account No. <b>V0010876650</b>			2006			H	
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				100.00
Account No. <b>Z20809A</b>	$\vdash$	$\vdash$	2006	$\vdash$		$\vdash$	
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				194.00
Sheet no. 4 of 10 sheets attached to Schedule of			S	Subt	ota	.1	566.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	300.00

In re	Michael A. Moore
	Lisa S. Moore

Case No.	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED		AMOUNT OF CLAIM
Account No. B44898B			2006 Collection account		E		
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С					385.00
Account No. <b>V0010752447</b>			2006				
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				
							240.00
Account No. B44898A  Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305	-	С	2005 Collection account				779.00
Account No. <b>B60542A</b>	t		2005	H	H		
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				70.00
Account No. <b>V0010744708</b>	f	H	2005				
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				50.00
Sheet no5 of _10 _ sheets attached to Schedule of				Sub	ota	.1	1,524.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	1,524.00

In re	Michael A. Moore
	Lisa S. Moore

Case No.	

#### Debtors

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED		AMOUNT OF CLAIM
Account No. <b>Z20809</b>	1		2005 Collection account	'	E		
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С					341.00
Account No. <b>B68626A</b>	╁		2005	$\vdash$	$\vdash$	$\vdash$	
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				
							118.00
Account No. B44898  Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	2004 Collection account				1,899.00
Account No. B68626			2004	T	$\vdash$	$\vdash$	
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				328.00
Account No. <b>V0010517465</b>	$\vdash$		2003	$\vdash$	$\vdash$	$\vdash$	
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				136.00
Sheet no6 of _10_ sheets attached to Schedule of					tota		2,822.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	2,322.00

In re	Michael A. Moore
	Lisa S. Moore

CREDITOR'S NAME, MAILING ADDRESS	CODE	н	Isband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND	CONTI	UNL	DIS	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NGENT	١'n	ISPUTED	AMOUNT OF CLAIM
Account No. P34217A			2003	<b> </b>	DATED		
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305		С	Collection account				1,068.00
Account No. <b>V0010329633</b>	╀		2002	-	┞	_	1,000.00
Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305	-	С	Collection account				
							82.00
Account No. P34217  Finance System of Green Bay, Inc. PO Box 1597		С	2001 Collection account				
Green Bay, WI 54305							152.00
Account No. 01 SC 6305			Money Judgment				
Gary Jonet 1480 Adam Drive De Pere, WI 54115		С					
							Unknown
Account No. <b>02 SC 204</b>	-		Money Judgment				
Gary Jonet 1480 Adam Drive De Pere, WI 54115		С					
							802.50
Sheet no. <u>7</u> of <u>10</u> sheets attached to Schedule of					tota		2,104.50
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nıs	pag	ge)	· ·

In re	Michael A. Moore
	Lisa S. Moore

Case No.		

#### Debtors

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED		AMOUNT OF CLAIM
Account No. GEM 6220700			2008 Medical bill	'	E		
Green Bay Emergency Medicine 6400 Industrial Loop Greendale, WI 53129-2452		С	Medical bill				307.00
Account No. <b>96 SC 6389</b>	t		Money Judgment	T	$\vdash$		
James F. Nier 1639 Woodsdale Suamico, WI 54173		С					788.00
Account No. <b>02 SC 5259</b>	╀		Money Judgment	╀	L		700.00
Joseph H. Gilson 2372 South Oneida Street Green Bay, WI 54304	-	С	money daugment				1,228.89
Account No. <b>13765</b>	╁		2004	+	H		
La Chapelle Credit Service 200 South Monroe P.O. Box 113 Green Bay, WI 54305		С	Collection account				1,230.00
Account No. 98 SC 1166	┢		Money Judgment	╁	$\vdash$		,
McKenzie Check Advance dba National Cash Advance 506 South Military Green Bay, WI 54303		С					452.00
Sheet no. <b>8</b> of <b>10</b> sheets attached to Schedule of				Subt	ota	1	4,005.89
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	7,000.09

In re	Michael A. Moore
	Lisa S. Moore

Case No.		

#### Debtors

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  Account No. 97 SC 3626	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  Money Judgment	CONTINGENT	DZL_QD_DAHE	۱ų	AMOUNT OF CLAIM
Trecount two. Gr GG GG2G			lineiney eddg.iiein		D		
MSB Corporation dba Midas Muffler c/o Attorney John Foscato P.O. Box 1133 Green Bay, WI 54305-1133		С					889.59
Account No. 1231789			2004				
Prevea Clinic c/o Associated Collectors, Inc. 113 West Milwaukee Street Janesville, WI 53547-1039		С	Medical Bill				
							1,395.50
Account No. 645928633  Progressive Insurance Company c/o NCO Financial Services P.O. Box 41417 Philadelphia, PA 19101		С	2005 Collection account				122.00
Account No. 02 SC 5851			Money Judgment				
Raymond L. Schneider c/o Attorney Thomas O. Schultz 425 South Adams Street Green Bay, WI 54301-4117		С					157.18
Account No. <b>92 SC 4893</b>		$\vdash$		I		$\vdash$	
Valley Bank Northeast 310 West Walnut Street Green Bay, WI 54306		С					Unknown
Sheet no. <b>9</b> of <b>10</b> sheets attached to Schedule of	-			Subt	ota	ıl	2,564.27
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	ge)	2,304.27

In re	Michael A. Moore				
	Lisa S. Moore				

	_				_		_,	
CREDITOR'S NAME,	CO	1	sband, Wife, Joint, or Community	C O N T	U N			
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NT I NGEN	Ι'n	Ιг	= 1	AMOUNT OF CLAIM
Account No. <b>04 SC 1846</b>	T		2003-2004	<b>┦</b> ₹	A T E D		ł	
Wisconsin Public Service P.O. Box 19003 Green Bay, WI 54307		С	Utility Bills		D			1,392.00
Account No.			2007	T			1	
Wisconsin Public Service P.O. Box 19003 Green Bay, WI 54307		С	Utility Bill					
								1,400.00
Account No. 0401571868-0xxxx  Wisconsin Public Service P.O. Box 19003 Green Bay, WI 54307		С	2008 Utility Bill					
								1,450.00
Account No. 7386	1		2008 Medical bill					
Women's Specialty Care PO Box 5277 De Pere, WI 54115		С	Medical bill					2,033.00
A N-	+			+	+	-	4	2,033.00
Account No.								
Sheet no. 10 of 10 sheets attached to Schedule of	1			Sub	tota	al	7	0.075.00
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pa	ge)		6,275.00
			(Demont on Commercial of C		Tot			35,666.07
			(Report on Summary of Se	une	aul	es)	)	,

Michael A. Moore, Lisa S. Moore

Debtors

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

**Cellcom Wireless** 

Cellphone Contract 24 months Began 10/03

-	•	
	n	rΔ

Michael A. Moore, Lisa S. Moore

Debtors

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Michael A. Moore
In re Lisa S. Moore

Debtor	(~
Denior	

Case No.

#### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

Debtor's Marital Status:	DEPENDEN	TS OF DEBTOR AND SP	OUSE		
Married	RELATIONSHIP(S): Son	AGE(S): <b>4</b>			
Employment:	DEBTOR		SPOUSE		
Occupation	construction	unemployed			
Name of Employer	Nevilles, Inc.				
How long employed	10 years				
Address of Employer					
INCOME: (Estimate of average	ge or projected monthly income at time case filed)		DEBTOR		SPOUSE
	, and commissions (Prorate if not paid monthly)	\$	2,752.00	\$	0.00
2. Estimate monthly overtime		\$	0.00	\$	0.00
3. SUBTOTAL		\$	2,752.00	\$	0.00
4. LESS PAYROLL DEDUCT			740.00		
a. Payroll taxes and socia	ll security	\$	743.00	\$	0.00
b. Insurance		\$	0.00	\$	0.00
c. Union dues		\$	0.00	\$ \$	0.00
d. Other (Specify):			0.00	\$	0.00
5. SUBTOTAL OF PAYROLI	DEDUCTIONS	\$_	743.00	\$	0.00
6. TOTAL NET MONTHLY T		\$	2,009.00	\$	0.00
7. Regular income from operat	ion of business or profession or farm (Attach detailed	statement) \$	0.00	\$	0.00
8. Income from real property		\$	0.00	\$	0.00
9. Interest and dividends		\$	0.00	\$	0.00
dependents listed above	upport payments payable to the debtor for the debtor's	use or that of \$	0.00	\$	0.00
11. Social security or governm (Specify): unemplo		\$	0.00	\$	915.00
		<u> </u>	0.00	\$	0.00
12. Pension or retirement incom	me	\$	0.00	\$	0.00
13. Other monthly income (Specify):		\$	0.00	\$	0.00
		\$	0.00	\$	0.00
14. SUBTOTAL OF LINES 7	THROUGH 13	\$	0.00	\$	915.00
15. AVERAGE MONTHLY II	NCOME (Add amounts shown on lines 6 and 14)	\$	2,009.00	\$	915.00
16. COMBINED AVERAGE	MONTHLY INCOME: (Combine column totals from l	ine 15)	\$	2,924.0	0

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Mr. and Mrs. Moore are in the process of a divorce. They anticipate seperate living expenses as soon as they sell their home or the it is foreclosed. Mr. Moore works construction and anticipates being called back to work as weather permits. His income stated is based on 40 hours per week. Mrs. Moore is also expecting a child in October, and expects increased expenses as a result.

Michael A. Moore

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In re	Lisa	S. I	Mo	ore

	Case No.	
Debtor(s)		

## ${\bf SCHEDULE\; J-CURRENT\; EXPENDITURES\; OF\; INDIVIDUAL\; DEBTOR(S)}$

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Compl expenditures labeled "Spouse."	ete a separat	e schedule of
1. Rent or home mortgage payment (include lot rented for mobile home)	\$	1,216.00
a. Are real estate taxes included? Yes X No		·
b. Is property insurance included? Yes X No No		
2. Utilities: a. Electricity and heating fuel	\$	230.00
b. Water and sewer	\$	40.00
c. Telephone	\$	50.00
d. Other Cable (\$59), Internet (\$30)	\$	89.00
3. Home maintenance (repairs and upkeep)	\$	100.00
4. Food	\$	400.00
5. Clothing	\$	100.00
6. Laundry and dry cleaning	\$	25.00
7. Medical and dental expenses	\$	50.00
8. Transportation (not including car payments)	\$	501.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	100.00
10. Charitable contributions	\$	0.00
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	30.00
b. Life	\$	38.00
c. Health	\$	0.00
d. Auto	\$	88.00
e. Other	\$	0.00
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify)	\$	0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	0.00
b. Other	\$	0.00
c. Other	\$	0.00
14. Alimony, maintenance, and support paid to others	\$	0.00
15. Payments for support of additional dependents not living at your home	\$	0.00
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	0.00
17. Other Cellphone (\$60), Personal Grooming (\$40)	\$	100.00
Other	\$	0.00
18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,	\$	3,157.00
if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)		
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year		
following the filing of this document:		
Debtors are in the process of a divorce. They anticipate seperate living expenses.	_	
20. STATEMENT OF MONTHLY NET INCOME		
a. Average monthly income from Line 15 of Schedule I	\$	2,924.00
b. Average monthly expenses from Line 18 above	\$	3,157.00
c. Monthly net income (a. minus b.)	\$	-233.00

### **United States Bankruptcy Court** Eastern District of Wisconsin

	Michael A. Moore			
In re	Lisa S. Moore		Case No.	
		Debtor(s)	Chapter	7

#### DECLARATION CONCERNING DEBTOR'S SCHEDULES

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.				

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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#### United States Bankruptcy Court Eastern District of Wisconsin

In re	Lisa S. Moore			
		Debtor(s)	Chapter	7

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$2,254.00 YTD: Employment Income \$48,395.00 2007: Employment Income \$32,795.00 2006: Employment Income

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#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT SOURCE** 

\$0.00 YTD: Unemployment 2007: Unemployment \$1,841.00 \$4,092.00 2006: Unemployment

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS AMOUNT STILL DATES OF OF CREDITOR **PAYMENTS** AMOUNT PAID **OWING** 

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> **AMOUNT** DATES OF PAID OR PAYMENTS/ VALUE OF AMOUNT STILL **TRANSFERS TRANSFERS** OWING

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT STILL AMOUNT PAID

**OWING** 

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

COURT OR AGENCY CAPTION OF SUIT STATUS OR NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning

property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

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Best Case Bankruptcy

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION. FORECLOSURE SALE. DESCRIPTION AND VALUE OF TRANSFER OR RETURN **PROPERTY** 

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION

NAME AND ADDRESS OF CUSTODIAN

OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

**PROPERTY** 

#### 7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION **RELATIONSHIP TO** DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE **Dewane Law Office** 927 South Eighth Street P.O. Box 1507 Manitowoc, WI 54221-1507

DATE OF PAYMENT. NAME OF PAYOR IF OTHER THAN DEBTOR 4/08-6/08

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$100.00

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

ΓRANSFER(S) IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION Wells Fargo

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

closed 2/08

final balance: \$100

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

AMOUNT AND DATE OF SALE

OR CLOSING

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

■ Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

ADDRESS

DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME

ADDRESS

None

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS

DATE ISSUED

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None

b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE

NAME AND ADDRESS

TITLE

OF STOCK OWNERSHIP

22 . Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME **ADDRESS** DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT,

RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

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Best Case Bankruptcy

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	June 19, 2008	Signature	/s/ Michael A. Moore	
			Michael A. Moore	
			Debtor	
Date	June 19, 2008	Signature	/s/ Lisa S. Moore	
	_	•	Lisa S. Moore	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

# **United States Bankruptcy Court** Eastern District of Wisconsin

In	Michael A. Moore  a re Lisa S. Moore	Case No.	04-26960
	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTORNEY	FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the a compensation paid to me within one year before the filing of the petition in bankruptcy, or agree be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy	ed to be paid	d to me, for services rendered or to
	For legal services, I have agreed to accept\$		301.00
	Prior to the filing of this statement I have received\$		100.00
	Balance Due\$		0.00
<ol> <li>3.</li> </ol>	The source of the compensation paid to me was:  Debtor Other (specify):  The source of compensation to be paid to me is:		
	Debtor Other (specify):		
4.	I have not agreed to share the above-disclosed compensation with any other person unless the	ney are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are r copy of the agreement, together with a list of the names of the people sharing in the compen		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the ba. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any add. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption reaffirmation agreements and applications as needed; preparation and file 522(f)(2)(A) for avoidance of liens on household goods.	whether to f required; djourned hear n planning;	ile a petition in bankruptcy; rings thereof; preparation and filing of
6	By agreement with the debtor(s), the above disclosed fee does not include the following service		

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or

any other adversary proceeding.							
CERTIFICATION	ON						
I certify that the foregoing is a complete statement of any agreement or arranthis bankruptcy proceeding.	agement for payment to me for representation of the debtor(s) in						
Dated:	y P. Dewane						
	e Law Offices, LLP						
	uth Eight Street						
PO Box	1507						
Manito	voc, WI 54221-1507						
(920) 68	32-7732 Fax: (920) 682-3384						
tdewan	e@dewanelaw.com						

Form 8 (10/05)

## **United States Bankruptcy Court** Eastern District of Wisconsin

In re	Michael A. Moore Lisa S. Moore			Case No.		
			Debtor(s)	Chapter	7	
	CHAPTER 7 IN	DIVIDUAL DEBT	OR'S STATEME	NT OF INT	TENTION	
	I have filed a schedule of assets and li	iabilities which includes deb	its secured by property of	of the estate.		
	I have filed a schedule of executory c	ontracts and unexpired lease	s which includes person	al property subj	ect to an unexpir	ed lease.
	I intend to do the following with resp	ect to property of the estate	which secures those deb	ts or is subject to	o a lease:	
Descrip	otion of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
	Aspen Lane n Bay, WI 54303	Washington Mutua	I X			
1992 GMC Sierra 170,000 miles front end damage		American General Finance				Х
Propert	2	Lessor's Name	Lease will be assumed pursuan to 11 U.S.C. § 362(h)(1)(A)	nt .		
-NON	E-					
Date	June 19, 2008	Signature	/s/ Michael A. Moore Michael A. Moore Debtor	e		
Date	June 19, 2008	Signature	/s/ Lisa S. Moore Lisa S. Moore Joint Debtor			

# UNITED STATES BANKRUPTCY COURT **EASTERN DISTRICT OF WISCONSIN**

# NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

## 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

## 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

## **Chapter 7:** Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

### Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

Timothy P. Dewane	X /s/ Timothy P. Dewane	June 19, 2008									
Printed Name of Attorney	Signature of Attorney	Date									
Address:											
927 South 8th Street											
PO Box 1507											
Manitowoc, WI 54221-1507											
Inted Name of Attorney Idress: South 8th Street Box 1507 Initowoc, WI 54221-1507 I (We), the debtor(s), affirm that I (we) have received and read this notice.  Chael A. Moore Inted Name of Debtor  I (We) A moore Inter I (We) A moore I (We) A moor											
Certificate of Debtor  I (We), the debtor(s), affirm that I (we) have received and read this notice.  Michael A. Moore											
Manitowoc, WI 54221-1507 (920) 682-7732  Certificate of Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice.  Michael A. Moore Lisa S. Moore X /s/ Michael A. Moore June 19, 2008											
Lisa S. Moore	X /s/ Michael A. Moore	June 19, 2008									
Printed Name of Debtor	Signature of Debtor	Date									
Case No. (if known)	X _/s/ Lisa S. Moore	June 19, 2008									
	Signature of Joint Debtor (if any)	Date									

## **United States Bankruptcy Court** Eastern District of Wisconsin

In re	Michael A. Moore Lisa S. Moore		Case No.	
		Debtor(s)	Chapter	7

## **VERIFICATION OF CREDITOR MATRIX**

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowled	
THE ADOVE-HAINED DEDIOIS HELEDY VEHTY HIALTHE AHACHED HSLOLCIEUHOLS IS THE AHA COLLECTIO HE DESLOLTHELL KHOWIEU	dge.

Date:	June 19, 2008	/s/ Michael A. Moore
		Michael A. Moore
		Signature of Debtor
Date:	June 19, 2008	/s/ Lisa S. Moore
		Lisa S. Moore
		Signature of Debtor

Alan R. Case 4109 Creamery Road De Pere, WI 54115

American General Finance 1780 West Mason Street Green Bay, WI 54303-2331

Americredit Financial Services c/o Attorney Jerome Johnson Twp Plz East 330 East Kilbourn Avenue, #560 Milwaukee, WI 53202-3144

Associated Banc-Corp c/o Monco Services, Inc. P.O. Box 1641 Brookfield, WI 53008-1641

Bank Mutual c/o Finance System of Green Bay PO Box 1597 Green Bay, WI 54305

Bellin Health Bellin Provider Billing P.O. Box 22487 Green Bay, WI 54305-2487

Bellin Health c/o Attorney John Foscato P.O. Box 1133 Green Bay, WI 54305-1133

Bellin Health PO Box 22487 Green Bay, WI 54305-2487

Bellin Memorial Hospital c/o Finance Systems of Green Bay P.O. Box 1597 Green Bay, WI 54305

Cellcom Wireless

Citi Cards P.O. Box 6405 The Lakes, NV 88901-6405

Finance System of Green Bay, Inc. 301 N. Jackson St. P.O. Box 1597 Green Bay, WI 54305

Finance System of Green Bay, Inc. PO Box 1597 Green Bay, WI 54305

Gary Jonet 1480 Adam Drive De Pere, WI 54115

Green Bay Emergency Medicine 6400 Industrial Loop Greendale, WI 53129-2452

James F. Nier 1639 Woodsdale Suamico, WI 54173

Joseph H. Gilson 2372 South Oneida Street Green Bay, WI 54304

La Chapelle Credit Service 200 South Monroe P.O. Box 113 Green Bay, WI 54305

McKenzie Check Advance dba National Cash Advance 506 South Military Green Bay, WI 54303

MSB Corporation dba Midas Muffler c/o Attorney John Foscato P.O. Box 1133 Green Bay, WI 54305-1133

Prevea Clinic c/o Associated Collectors, Inc. 113 West Milwaukee Street Janesville, WI 53547-1039

Progressive Insurance Company c/o NCO Financial Services P.O. Box 41417 Philadelphia, PA 19101

Raymond L. Schneider c/o Attorney Thomas O. Schultz 425 South Adams Street Green Bay, WI 54301-4117

Valley Bank Northeast 310 West Walnut Street Green Bay, WI 54306 Washington Mutual P.O. Box 3139 Milwaukee, WI 53201-3139

Wisconsin Public Service P.O. Box 19003 Green Bay, WI 54307

Women's Specialty Care PO Box 5277 De Pere, WI 54115

### B22A (Official Form 22A) (Chapter 7) (01/08)

In re	Michae Lisa S.	l A. Moore Moore	
	_	Debtor(s)	
Case N	Number:		
		(If known)	

According t	o the	calculations	required	by	this	statement

- ☐ The presumption arises.
- **■** The presumption does not arise.

(Check the box as directed in Parts I, III, and VI of this statement.)

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. EXCLUSION FOR DISABI	LEI	D VETERANS	A	ND NO	N-CONS	UM	ER DEBTO	RS	
1.4	If you are a disabled veteran described in the Veter Declaration, (2) check the box for "The presumptio VIII. Do not complete any of the remaining parts o	n do	oes not arise" at the							
1A	□ Veteran's Declaration. By checking this box, I § 3741(1)) whose indebtedness occurred primarily while I was performing a homeland defense activity	duri	ing a period in whi	ch	I was on a	active duty (a				
1B	If your debts are not primarily consumer debts, che the remaining parts of this statement.	ck t	he box below and o	coı	nplete the	verification	in P	art VIII. Do not	com	plete any of
	☐ Declaration of non-consumer debts. By checking	ing t	this box, I declare t	tha	t my debts	s are not prin	naril	y consumer debt	s.	
	Part II. CALCULATION OF M	ON	THLY INCO	M	E FOR	§ 707(b)(7	7) E	XCLUSION		
2	Marital/filing status. Check the box that applies at a. ☐ Unmarried. Complete only Column A ("Does b. ☐ Married, not filing jointly, with declaration of "My spouse and I are legally separated under a purpose of evading the requirements of § 707 (for Lines 3-11.	ebto of se appl	r's Income") for I eparate households icable non-bankruj	Lir . E pto	nes 3-11. By checkin By law or n	g this box, d ny spouse an	ebto d I a	r declares under are living apart of	ther	than for the
c.										
d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Sp							Spo	use's Income'')	for l	Lines 3-11.
	All figures must reflect average monthly income recalendar months prior to filing the bankruptcy case the filing. If the amount of monthly income varied six-month total by six, and enter the result on the agent of the six-month total by six, and enter the result on the agent of the six-month total by six, and enter the result on the agent of the six-month total by six, and enter the result on the agent of the six-month total by six, and enter the result on the agent of the six-month total by six, and enter the result of the six-month total by six, and enter the result of the six-month total by six, and enter the result of the six-month total by six, and enter the result of the six-month total by six, and enter the result of the six-month total by six-month total	, en dur	ding on the last day ing the six months,	y c	f the mon	th before		Column A Debtor's Income		Column B Spouse's Income
3	Gross wages, salary, tips, bonuses, overtime, con	nmis	ssions.				\$	514.67	\$	46.13
4	Income from the operation of a business, profess enter the difference in the appropriate column(s) of business, profession or farm, enter aggregate numb not enter a number less than zero. Do not include Line b as a deduction in Part V.	Lin	ne 4. If you operate and provide details	e n	nore than on an attach	one nment. Do	7	291	*	
4			Debtor		Spo	ouse				
	a. Gross receipts	\$		\$		0.00				
	b. Ordinary and necessary business expenses	\$	<b>0.00</b> btract Line b from			0.00				
	C. Business income					cc:	\$	0.00	\$	0.00
	Rents and other real property income. Subtract I the appropriate column(s) of Line 5. Do not enter a part of the operating expenses entered on Line b	a nu	mber less than zero a deduction in Par	o.	Do not in V.	clude any				
5	<ul><li>a. Gross receipts</li><li>b. Ordinary and necessary operating expenses</li></ul>	\$	Debtor 0.00 0.00		5	0.00 0.00				
	c. Rent and other real property income		btract Line b from			0.00	\$	0.00	\$	0.00
6	Interest, dividends, and royalties.						\$	0.00		0.00
7	Pension and retirement income.									
,	2 Julion with Lettle children income.						\$	0.00	<b>3</b>	0.0

8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.	\$	0.00	\$	0.00
9	<b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:				
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00	\$	674.33	\$	674.50
10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.    Debtor   Spouse				
	Total and enter on Line 10	\$	0.00	\$	0.00
11	<b>Subtotal of Current Monthly Income for § 707(b)(7).</b> Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).	\$	1,189.00	\$	720.63
12	<b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$			1,909.63
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION	N			
13	<b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by the enter the result.	numb	per 12 and \$		22,915.56
14	<b>Applicable median family income.</b> Enter the median family income for the applicable state and he (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankru				
	a. Enter debtor's state of residence: b. Enter debtor's household size:		3 \$		65,440.00
	<b>Application of Section 707(b)(7).</b> Check the applicable box and proceed as directed.				
15	<ul> <li>■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "Top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VIII.</li> <li>□ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of the page 1.</li> </ul>		-	es not	arise" at the

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCULATION OF CURRENT MONTHLY INCO	MF FOR 8 707(b)(2)	
16	Enter the amount from Line 12.	\$ s	
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any Column B that was NOT paid on a regular basis for the household expenses of the debtor dependents. Specify in the lines below the basis for excluding the Column B income (such spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's amount of income devoted to each purpose. If necessary, list additional adjustments on a snot check box at Line 2.c, enter zero.	r the debtor's as payment of the dependents) and the	
17	a.       \$         b.       \$         c.       \$		
	d. \$ Total and enter on Line 17	\$	
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the re-	sult. \$	
	Part V. CALCULATION OF DEDUCTIONS FROM	INCOME	
Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)			

19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				\$	
National Standards: health care. Enter in Line al below the amount from IRS National Standards Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/wcclerk">www.usdoj.gov/wcclerk</a> of the bankruptcy court.) Enter in Line b1 the number of members of your household who are 65 years of age or on a query of household members must be the same as the number stated in Line 14b.) Multiply Line obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Acc2 to obtain a total health care amount, and enter the result in Line 19B.  Household members under 65 years of age  Household members 65 years of age  Allowance per member				lards for Out-of-Pocket <u>oj.gov/ust/</u> or from the who are under 65 years age or older. (The total y Line a1 by Line b1 to iply Line a2 by Line c2. Add Lines c1 and		
	b1. Number of members	b2.		ber of members		
	c1. Subtotal	c2.	Subto	otal		\$
20A	Local Standards: housing and utilities; Utilities Standards; non-mortgage expense available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from t	es for the applicable co	unty a	nd household size. (7		\$
20B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.					
	<ul> <li>a. IRS Housing and Utilities Standards; mortgage/rental expense</li> <li>b. Average Monthly Payment for any debts secured by your</li> </ul>			\$		
	home, if any, as stated in Line 42			\$		
	c. Net mortgage/rental expense			Subtract Line b from	1 Line a.	\$
21	<b>Local Standards: housing and utilities; adjustment.</b> If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:				\$	
	Local Standards: transportation; vehicle operation/public transportation expense.  You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.					
22A	$\square 0 \square 1 \square 2$ or more.					
	If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)			\$		
22B	<b>Local Standards: transportation; additional public transportation expense.</b> If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for				\$	

23	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owner vehicles.)  1 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from th (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Little result in Line 23. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42  c. Net ownership/lease expense for Vehicle 1	\$	
24	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Lit the result in Line 24. Do not enter an amount less than zero.  a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle b. 2, as stated in Line 42  c. Net ownership/lease expense for Vehicle 2		
	Other Necessary Expenses: taxes. Enter the total average monthly e.		\$
25	state and local taxes, other than real estate and sales taxes, such as inc security taxes, and Medicare taxes. <b>Do not include real estate or sale</b>		\$
26	Other Necessary Expenses: involuntary deductions for employment deductions that are required for your employment, such as retirement Do not include discretionary amounts, such as voluntary 401(k) co	\$	
27	Other Necessary Expenses: life insurance. Enter total average mon life insurance for yourself. Do not include premiums for insurance any other form of insurance.	\$	
28	Other Necessary Expenses: court-ordered payments. Enter the tot pay pursuant to the order of a court or administrative agency, such as include payments on past due obligations included in Line 44.	\$	
29	Other Necessary Expenses: education for employment or for a phy the total average monthly amount that you actually expend for educate education that is required for a physically or mentally challenged depoproviding similar services is available.	\$	
30	Other Necessary Expenses: childcare. Enter the total average mont childcare - such as baby-sitting, day care, nursery and preschool. Do i	\$	
31	Other Necessary Expenses: health care. Enter the total average mo health care that is required for the health and welfare of yourself or yoursurance or paid by a health savings account, and that is in excess of include payments for health insurance or health savings accounts	\$	
32	Other Necessary Expenses: telecommunication services. Enter the actually pay for telecommunication services other than your basic hor pagers, call waiting, caller id, special long distance, or internet service welfare or that of your dependents. Do not include any amount prev	\$	
33	Total Expenses Allowed under IRS Standards. Enter the total of L	\$	

		Subpart B: Additio	onal Living Expense Deductions		
		Note: Do not include any exp	penses that you have listed in Lines 19-32		
		gories set out in lines a-c below that are reasonal	avings Account Expenses. List the monthly expenses in bly necessary for yourself, your spouse, or your		
34	a.	Health Insurance	\$		
	b.	Disability Insurance	\$		
	c.	Health Savings Account	\$	\$	
	Total a	nd enter on Line 34.			
	If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:				
	\$				
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.			\$	
36	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			\$	
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.			\$	
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.			\$	
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.			\$	
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).			\$	
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40				

	S	Subpart C: Deductions for De	bt Payment		
42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.				
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a.		\$ Total: Add Lines	□yes □no	\$
43	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.				Ψ
	Name of Creditor a.	Property Securing the Debt	\$	ne Cure Amount	
	Payments on prepetition priority cla	ims. Enter the total amount, divided b	•	otal: Add Lines	\$
44	<b>Payments on prepetition priority claims.</b> Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. <b>Do not include current obligations, such as those set out in Line 28.</b>				\$
	Chapter 13 administrative expenses chart, multiply the amount in line a by				
45	issued by the Executive Offic information is available at wy the bankruptcy court.)	napter 13 plan payment. strict as determined under schedules e for United States Trustees. (This vw.usdoj.gov/ust/ or from the clerk of tive expense of Chapter 13 case	x Total: Multiply Lin	es a and b	\$
46	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.			\$	
	S	ubpart D: Total Deductions f	rom Income		
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.				\$
	Part VI. DI	ETERMINATION OF § 707(I	o)(2) PRESUMP	TION	
48	Enter the amount from Line 18 (Cu	rrent monthly income for § 707(b)(2	))		\$
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))			\$	
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.			\$	
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the number 60 and enter the result.			\$	
	Initial presumption determination. Check the applicable box and proceed as directed.				
52	☐ The amount on Line 51 is less that statement, and complete the verification				
	☐ The amount set forth on Line 51 is more than \$10,950 Check the box for "The presumption arises" at the top of statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remain				
	☐ The amount on Line 51 is at least	\$6,575, but not more than \$10,950.	Complete the remain	der of Part VI (Lin	es 53 through 55).
53	Enter the amount of your total non-priority unsecured debt			\$	
54	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.			\$	

	Second	Secondary presumption determination. Check the applicable box and proceed as directed.				
55		☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.				
		☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.				
		Part VII. ADDITIONAL EXE	PENSE	CLAIMS		
	you and 707(b)(	<b>Expenses.</b> List and describe any monthly expenses, not otherwise ad your family and that you contend should be an additional deduction (2)(A)(ii)(I). If necessary, list additional sources on a separate pagem. Total the expenses.	tion from	your current monthly income under §		
56		Expense Description		Monthly Amount		
	a.			\$		
	b.			\$		
	c.			\$		
	d.			\$		
	<u> </u>	Total: Add Lines a, b, c, ar	nd d	\$		
		Part VIII. VERIFIC	ATION			
	I declar	are under penalty of perjury that the information provided in this st ign.)  Date: June 19, 2008		es true and correct. (If this is a joint case, both debtors  es: /s/ Michael A. Moore  Michael A. Moore  (Debtor)		
57		Date: <b>June 19, 2008</b>	Signature	,		

## **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 12/01/2007 to 05/31/2008.

## Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Neville's Inc.

Income by Month:

6 Months Ago:	12/2007	\$0.00
5 Months Ago:	01/2008	\$0.00
4 Months Ago:	02/2008	\$0.00
3 Months Ago:	03/2008	\$0.00
2 Months Ago:	04/2008	\$464.00
Last Month:	05/2008	\$2,624.00
	Average per month:	\$514.67

## Line 9 - Unemployment compensation (included in CMI)

Source of Income: Unemployment

Income by Month:

6 Months Ago:	12/2007	\$0.00
5 Months Ago:	01/2008	\$1,328.00
4 Months Ago:	02/2008	\$1,328.00
3 Months Ago:	03/2008	\$1,328.00
2 Months Ago:	04/2008	\$62.00
Last Month:	05/2008	\$0.00
	Average per month:	\$674.33

## **Current Monthly Income Details for the Debtor's Spouse**

## **Spouse Income Details:**

Income for the Period 12/01/2007 to 05/31/2008.

## Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Kelly Services

Income by Month:

6 Months Ago:	12/2007	\$0.00
5 Months Ago:	01/2008	\$276.75
4 Months Ago:	02/2008	\$0.00
3 Months Ago:	03/2008	\$0.00
2 Months Ago:	04/2008	\$0.00
Last Month:	05/2008	\$0.00
	Average per month:	\$46.13

### Line 9 - Unemployment compensation (included in CMI)

Source of Income: Unemployment

Income by Month:

6 Months Ago:	12/2007	\$0.00
5 Months Ago:	01/2008	\$426.00
4 Months Ago:	02/2008	\$852.00
3 Months Ago:	03/2008	\$1,065.00
2 Months Ago:	04/2008	\$852.00
Last Month:	05/2008	\$852.00
	Average per month:	\$674.50